

Recertification Report - CARF Accredited Organization

Provider Name			Provider Number		Begin Cert Date	End Cert Date
LINCOLN SELF RELIANCE, INC. (LSR)			1528112620		6/30/2010	6/30/2011
Organizational Practices	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Provider Retrained on:	Health, Safety, or Rights Issue?	Date QIP Due
	Staff Training (Wyoming Medicaid rules Chapter 45, Section 26)	In-Compliance	5 of 5 staff files reviewed contained documentation of Participant Specific Training, current MANDT certification and medication assistance training.		No	
	Staff Training (Wyoming Medicaid rules Chapter 45, Section 26)	In-Compliance	The provider training includes verification of training for all required Division modules as required for all staff.		No	
	Staff Training (Wyoming Medicaid rules Chapter 45, Section 26)	Recommendation (Systemic)	It was identified through file review that the current form used for Participant Specific Training does contain all the required components, however all required areas were not consistently completed.		No	6/29/2010
	Emergency Drills (CARF 1.E.)	In-Compliance	Documentation from 5 sites were reviewed and showed a variety of drills run on a variety of shifts.		No	
	Emergency Procedures during Transportation (CARF 1.E.)	In-Compliance	2 of 2 vehicles reviewed had emergency procedures available during transport.		No	
	Internal Inspections (CARF 1.E.)	In-Compliance	Documentation of internal inspections was present for the 5 sites reviewed, including documentation of follow up when needed. Frequency of internal inspections met applicable standards.		No	

Recertification Report - CARF Accredited Organization

	Staff Qualifications (Wyoming Medicaid rules Chapter 45, Sections 8 through 22)	In-Compliance	5 out of 5 staff files reviewed had evidence of current CPR and First Aid certification and background checks.		No	
	External Inspections (CARF 1.E.)	In-Compliance	Documentation of annual external inspections was present for the 5 service locations reviewed, including documentation of follow up when needed.		No	
	Progress made on prior DDD Survey recommendations	In-Compliance	With the exception of the issues readdressed in this survey, the provider continues to make progress on recommendations from the previous survey.		No	
	Progress made on prior CARF Survey recommendations	In-Compliance	CARF Survey was not reviewed during this survey as provider will be having a CARF survey later this year.		No	
	Incident reporting standards (Wyoming Medicaid rules Chapter 45, Section 30)	In-Compliance	The provider's policy and procedure was reviewed and met the applicable standards.		No	
	Incident reporting standards (Wyoming Medicaid rules Chapter 45, Section 30)	In-Compliance	3 of 4 staff interviewed were able to identify where to locate information of the Division's Notification of Incident Reporting process.		No	
	Complaint and Grievance (CARF 1.D.)	In-Compliance	The policy and procedure was reviewed during the last Division site survey and met applicable standards.		No	
	Rights of Participants (Wyoming Medicaid rules, Chapters 45, Section 26, CARF Section 1)	In-Compliance	The policy and procedure was reviewed during the last Division Site Survey and met applicable standards.		No	
	Rights of Participants (Wyoming Medicaid rules, Chapters 45, Section 26, CARF Section 1)	In-Compliance	4 of 4 staff interviewed were able to articulate functional knowledge of participant rights and rights restrictions.		No	

Survey/Certification Staff Name: Phillip Browning, Provider Support Specialist

Date: 5/27/2010

Note: Providers can dispute a recommendation by submitting a certified letter to the Division within ten business days of receipt of the recertification report. The letter must include the specific recommendation being disputed, information on why the provider does not agree with the recommendation, and supporting documentation.

Recertification Report - CARF Accredited Organization

Page 3/5

	Behavior Plans (Chapter 45, Section 29)	In-Compliance	4 of 4 staff interviewed were able to give examples of what a Positive Behavior Support Plan is.		No	
	Restraint standards (Chapter 45, Section 28)	In-Compliance	The policy and procedure was reviewed and was found to meet applicable standards.		No	
	Other rule or standard, Medication Assistance Policy and Procedures.	In-Compliance	Provider Policy and Procedures for Medication Assistance meets current standards.		No	
	Transportation Requirements (CARF 1.E.9)	In-Compliance	2 vehicles were reviewed across both service locations, and all met current requirements.		No	
Participant Specific Reviews	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Provider Retrained on:	Health, Safety, or Rights Issue?	Date QIP Due
	Releases of Information (CARF 2.B.)	Recommendation (Focused)	5 participant files were reviewed and when present the releases of information met applicable standards, except for participant #2 did not have dates consistently identified when implemented or expired.		No	6/29/2010
	Emergency Information (CARF 2.B.)	In-Compliance	5 participant files were reviewed, all of which contained emergency information.		No	
	Billing and Documentation (Wyoming Medicaid Rules Chtr. 45 Sect. 27)	In-Compliance	5 participant files were reviewed and met current documentation standards.		No	

Survey/Certification Staff Name: Phillip Browning, Provider Support Specialist

Date: 5/27/2010

Note: Providers can dispute a recommendation by submitting a certified letter to the Division within ten business days of receipt of the recertification report. The letter must include the specific recommendation being disputed, information on why the provider does not agree with the recommendation, and supporting documentation.

Recertification Report - CARF Accredited Organization

Page 4/5

Case Management Services	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Provider Retrained on:	Health, Safety, or Rights Issue?	Date QIP Due
	Case manager monthly/quarterly documentation meets requirements of Chapters 41, 42 and 43, and DD rule, Chapter 1	In-Compliance	4 files were reviewed, and each met the standards for monthly/quarterly documentation.		No	
	Team meeting notes (Chapters 41, 42, and 43 and DD rule, Chapter 1)	In-Compliance	4 participant files were reviewed, and in each, the annual and 6 month team meeting notes were present and met applicable requirements.		No	
	Monitoring implementation of the IPC (Chapters 41, 42, and 43 and DD rule, Chapter 1)	Suggestion	4 participant files were reviewed and documentation of monitoring and follow up was present and met applicable standards. It is suggested that case managers ensure that they are receiving all incident reports from outside providers and track all incidents in order to provide appropriate follow up.		No	
	Other rule or standard, Medication Assistance Policy and Procedures.	Recommendation (Systemic)	Case managers did not have evidence of medication assistance policy and procedures.		No	6/29/2010
Residential Services	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Provider Retrained on:	Health, Safety, or Rights Issue?	Date QIP Due
	Organization maintains a healthy and safe environment – all service settings (CARF 1.E.10 Chapter 45, Section 23)	Recommendation (Focused)	3 residential sites were visited, and all showed evidence of maintaining a healthy and safe environment with the exception of the following concerns: Group Home #2 had expired contents in the first aid kit.	5/26/2010	Yes	6/11/2010

Survey/Certification Staff Name: Phillip Browning, Provider Support Specialist

Date: 5/27/2010

Note: Providers can dispute a recommendation by submitting a certified letter to the Division within ten business days of receipt of the recertification report. The letter must include the specific recommendation being disputed, information on why the provider does not agree with the recommendation, and supporting documentation.

Recertification Report - CARF Accredited Organization

	Organization meets CARF Standards on Community Housing (CARF Section 4.J)	In-Compliance	The provider is meeting applicable standards.		No	
	The organization meets the standards in Chapter 45, section 23)	In-Compliance	With the exception of where otherwise noted in this report, the provider is meeting these standards.		No	
Day Habilitation, Employment Services	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Provider Retrained on:	Health, Safety, or Rights Issue?	Date QIP Due
	The organization meets the standards for Community Integration (CARF 4.E)	In-Compliance	The organization meets the standards, as evidenced by documentation review which indicated a variety of opportunities.		No	
	Organization maintains a healthy and safe environment – all service settings (CARF 1.E.10 Chapter 45, Section 23)	Recommendation (Focused)	The provider showed evidence of maintaining a healthy and safe environment with the exception of the following: day hab #2--refrigerator contained food items not in their original container that were not labeled appropriately.		Yes	6/11/2010
	Organization meets the standards for the service provided (CARF Standards and Medicaid rules)	In-Compliance	The organization meets the standards as evidenced by service observation.		No	

Survey/Certification Staff Name: Phillip Browning, Provider Support Specialist

Date: 5/27/2010

Note: Providers can dispute a recommendation by submitting a certified letter to the Division within ten business days of receipt of the recertification report. The letter must include the specific recommendation being disputed, information on why the provider does not agree with the recommendation, and supporting documentation.